



August 18, 2020

Web Announcement 2281

Attention Provider Types 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurse) and 77 (Physician Assistant):

Claims Reprocessed to Pay under Correct Fund Code

Federally Qualified Health Center (FQHC) claims submitted by provider types 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurse) and 77 (Physician Assistant) that processed on or after October 26, 2018, through June 24, 2020, in error as family planning (FP) claims or that should have been processed as FP claims have been automatically reprocessed to pay under the correct fund code. Results of the reprocessed claims appeared on the remittance advice dated August 7, 2020. Providers may not see a difference from the initial payment.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.